1393064



UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

OTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

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Name of Offering (check if this is an amendment and name has changed, and indicate change.)	<u> </u>
Mozaic Group Ltd. Non-Voting Common Stock and Subordinated Non-Negotiable Promisso	ory Notes
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	nroe (%)
A. BASIC IDENTIFICATION DATA	· · · · · · · · · · · · · · · · · · ·
1. Enter the information requested about the issuer	1.10/69
Name of Issuer (check if this is an amendment and name has changed, and indicate char. Mozaic Group Ltd.	
Address of Executive Offices (Number and Street, City, State, Zip Code) 5257 Shaw, Suite 204, St. Louis, MO 63110	in none Number (Including Area Code)
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business Marketing communications services	PROCESSED
business trust limited partnership, to be formed Month Year	olease specify): THOMSON FINANCIAL
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State CN for Canada; FN for other foreign jurisdiction)	MO
GENERAL INSTRUCTIONS	
Federal: Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D of 77d(6).	or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.
When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering	A notice is deemed filed with the U.S. Securities

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

			A. BASIC IDI	ENTI	FICATION DATA					
2. Enter the information re	quested for the fo	llowin	ıg:							
 Each promoter of t 	• Each promoter of the issuer, if the issuer has been organized within the past five years;									
 Each beneficial ow 	• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer									
 Each executive off 	icer and director o	f corp	orate issuers and of	corpo	rate general and mar	naging	partners of	partn	ership issuers; and	
 Each general and r 	nanaging partner o	f part	nership issuers.							
Check Box(es) that Apply:	Promoter		Beneficial Owner	Ø	Executive Officer	Ø	Director		General and/or Managing Partner	
Full Name (Last name first, i Gibson, Mary Ann	f individual)									
Business or Residence Addre 5257 Shaw, Suite 204, S	`		t, City, State, Zip Co	ode)			 -			
Check Box(es) that Apply:	Promoter		Beneficial Owner	Z	Executive Officer	Z	Director		General and/or Managing Partner	
Full Name (Last name first, i Earlewine, Ray	f individual)						<u></u>			
Business or Residence Addre 5257 Shaw, Suite 204, St.			t, City, State, Zip Co	de)					. <u>.</u> .	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer	Z	Director		General and/or Managing Partner	
Full Name (Last name first, i St. John, Denis	f individual)									
Business or Residence Addre 5257 Shaw, Suite 204, St	•		, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	Z	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, i Mary Ann Gibson Amende		Rev	ocable Living Trus	st u/t	/a dated 9/5/97			•		
Business or Residence Addres	•		, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter	7	Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, it DCS Family Investments	•			*						
Business or Residence Addres 5257 Shaw, Suite 204, St			, City, State, Zip Co	de)					-	
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if	individual)									
Business or Residence Address	s (Number and	Street	, City, State, Zip Co	de)						
Check Box(es) that Apply:	Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partner	
Full Name (Last name first, if	`individual)									
Business or Residence Address	s (Number and	Street	, City, State, Zip Co	de)						
(Use blank sheet, or copy and use additional copies of this sheet, as necessary)										

	B. INFORMATION ABOUT OFFERING													
1	Has the issuer sold or does the issuer intend to sell to non accredited investors in this offering?									Yes	No			
ι.	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.								***************************************		X			
2.									••••	\$ 100,000.00 ^{1;}				
3.	*except in the discretion of the G.E.O.								Yes	No				
4.									lirectly, any	<u></u>				
	commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.													
Ful N/		Last name	first, if ind	ividual)						• • • •				
		Residence	Address (N	lumber and	d Street, C	ity, State, 2	Zip Code)							
Nai	me of As	sociated Bi	roker or De	aler										
Sta			Listed Ha											
	(Check	"All States	s" or check	individual	States)			•••••	••••••••••	***************************************	•••••	All States		
	AL	AK	ĀZ	AR	CA	CO	CT	DE	DC	FL	GA	HÏ	ĪD	
	MT]	IN NE	IA NV	KS NH	[KY]	LA NM	ME NY	MD NC	MA ND	MI OH	[MN] [OK]	MS OR	MO PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	$\overline{\mathbf{w}}$	wi)	WY	PR	
Ful	l Name (Last name	first, if ind	ividual)							<u></u>			
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)				 .			
Nov	ne of Asi	coninted De	oker or De	alar										
1441	ne or As	sociated Di	OKCI OI DE											
Sta			Listed Ha			· · ·								
	(Check	"All States	s" or check	individual	States)			•••••		***************************************	•••••	☐ All	l States	
	AL	AK	AZ	AR	CĀ	CO	CT	DE	DC	FL	GA	HI	ID	
	IL MT	IN NE	IA NV	KS NH	KŸ NJ	LA NM	ME NY	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Ful	l Name (Last name	first, if ind	vidual)								"		
Bus	siness or	Residence	Address (1	Number an	d Street, C	City, State,	Zip Code)							
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers														
(Check "All States" or check individual States)														
AL AK AZ AR CA CO CT DE DC FL GA									HI	ID				
	IL IN IA KS KY LA ME MD MA MI MN										MS	MO		
	MT NE NV NH NJ NM NY NC ND OH OK RI SC SD TN TX UT VT VA WA WV WI									OR WY	PA PR			

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate c ffering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$ 1,425,000.00	s 1,425,000.00
	Equity		\$ 75,000.00
	☐ Common ☐ Preferred		<u> </u>
	Convertible Securities (including warrants)	s 0.00	0.00 \$
	Partnership Interests		\$ 0.00
	Other (Specify)		e 0.00
	Total	\$ \$ 1,500,000.00	\$ 1,500,000.00
	Answer also in Appendix, Column 3, if filing under ULOE.	1	<u>3</u>
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	1	Aggregate Dollar Amount of Purchases
	Accredited Investors	18	\$_1,500,000.00
	Non-accredited Investors	0	\$_0.00
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.			
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$_0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$ 0.00
	Legal Fees		\$ 0.00
	Accounting Fees		\$ 0.00
	Engineering Fees	-	\$ 0.00
	Sales Commissions (specify finders' fees separately)		\$ 0.00
	Other Expenses (identify)	_	\$_0.00
	Total		\$ 0.00

	C. OFFERING PRICE, NUMB	BER OF INVESTORS, EXPENSES AND USE OF	PROCEEDS								
	b. Enter the difference between the aggregate offeri and total expenses furnished in response to Part C— proceeds to the issuer."	Question 4.a. This difference is the "adjusted gross	3	\$1,500,000.00							
5.	Indicate below the amount of the adjusted gross pro cach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	l									
			Payments to Officers, Directors, & Affiliates	Payments to Others							
	Salarics and fees		\$	\$							
	Purchase of real estate		\$	\$							
	Purchase, rental or leasing and installation of mac and equipment	<u></u> \$	<u></u> \$								
	Construction or leasing of plant buildings and faci	<u></u> \$	\$								
	Acquisition of other businesses (including the val- offering that may be used in exchange for the asse issuer pursuant to a merger)	□\$									
	Repayment of indebtedness										
	Working capital										
	Other (specify): Repurchase of shares										
	Column Totals	\$ 1,500,000.00 \$ 0.00									
	Total Payments Listed (column totals added)										
	D. FEDERAL SIGNATURE										
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to fur information furnished by the issuer to any non-acce	nish to the U.S. Securities and Exchange Commi	ssion, upon writte								
Iss	uer (Print or Type)	Signature 1	Date								
	ozaic Group Ltd.	New lew Selesu	2/28/07								
Na	me of Signer (Print or Type)	Title of Signer (Print or Type)									
	ry Ann Gibson	Chief Executive Officer									